

Your Child's Health

Wave 2-16-84

All runny noses aren't colds. The nose that always runs can mean lots of things. I hear a lot of folk lore about the different colors and types of runny noses but it doesn't help much. Thin clear fluid is seen early in colds, sometimes with allergies, and in vasomotor rhinitis. However, yucky green or yellow fluid may also be seen in colds and allergies as well as with bacterial complications. Figuring out why someone always has a runny nose can be complicated and may require a visit to the doctor.

Many stuffy or runny noses are allergic noses. Hayfever occurs at the same time every year depending on what pollen the person is allergic to. Perennial allergic rhinitis is the medical term for allergic noses that run all year. These are usually allergies to things we are exposed to all year like feather pillows, house dust and molds. Runny noses from allergy are unusual under age 3 and downright rare under one year of age. (Allergy is a complicated problem that we will devote an entire column to later in the year.)

Some young babies always have stuffy noses yet don't seem to be sick. Some of them have really runny noses but most are what we call noisy breathers. This happens in normal babies who have small nasal passages that make snuffling and snorting noises as the air flows through. Lots of treatment will only make things worse so the best rule is that if it isn't bothering the baby, leave well enough alone.

It will go away as the baby gets bigger.

Vasomotor rhinitis is stuffiness that comes in response to changes in temperature, emotional stress, physical exertion and irritants. This is a life long problem that doesn't respond well to medicat-

ions but is rarely more than a minor inconvenience.

A one sided runny nose usually means obstruction. In kids this almost always means they have stuffed something up in there. I've pulled everything from bits of foam rubber, rocks, peas, beads and pencil erasers to 18 inches of chain out of small nostrils. In people with allergies and some diseases, polyps can block one nostril. A polyp is a mass that results from overly enthusiastic growth of the membranes in the nose. If the bones or cartilage in the nose have been injured and are out of line one side may be obstructed, too.

Sinusitis is one of the more serious causes of stuffy noses. True sinus infections are bacterial infection filling the air spaces in the facial bones. The symptoms include pain over the sinuses, fever, stuffy nose with cloudy drainage and generally feeling ill. Sinusitis may follow the common cold or occur as a complication to any thing that blocks the passages. It is unusual in small children and teens. Sinusitis can be VERY serious and should be treated by a physician.

Finally there is the chronic rhinorrhea syndrome of childhood. Actually, I just made up the name but the problem is real enough. These are the kids who have runny noses more often than not, have no allergies that anyone can find and are perfectly well except for the drip. In this case it is often the parent who is bothered a lot more than the child and the best treatment is to buy lots of kleenex.

It goes away about age eight.

One last thought: Are runny noses in kids normal? Mark Twain must have thought so. Every kid he describes in his books had a runny nose!

Cut macaroni dunked in assorted food colors make colorful beads. Drain and dry completely. Put beads into paper cups and let children make their own necklaces, etc.

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Weight Gain

by Dr. Kitty Ferguson

We have established that for a normal, healthy baby, a woman should gain between 25-30 pounds during her pregnancy. Appetite normally increases during most pregnancies and, left to her own devices, the pregnant woman increases her daily caloric intake by 300-500 calories. The kinds of foods she eats, however, are extremely important. Specific nutrients are often in short supply during pregnancy and must be provided dietarily or by supplement. Let's take a look at some of these specific nutrients.

Iron: Deficiency of this mineral is the most frequent deficiency in the United States. It is particularly common in women, especially those of childbearing age. All women's diet should be supplemented with iron throughout pregnancy. Women whose iron stores were low before they became pregnant may be placed on an extra iron pill in addition to the regular prenatal vitamin. If this causes some stomach discomfort, it can be taken after meals or with orange juice, which enhances the absorption of iron. At the same time, women should eat foods that are rich in iron. An iron-rich diet will ensure that iron supplementation is sufficient and supply other nutrients that may be in short supply during pregnancy. Rich food sources of iron include meat, egg yolks, beans and peas. Other good sources are green leafy vegetables, whole grain and enriched cereals, deep green vegetables, and fish.

Zinc: During pregnancy, zinc deficiency is associated with fetal growth retardation and congenital malformations. Zinc deficiency is now thought to be more common among the general population than previously suspected. Because it is found in most foods containing iron, the recommended iron-rich diet will give the woman sufficient zinc. For strict vegetarians or for those with iron deficiency anemia before pregnancy, a zinc supplement is recommended.

Calcium: While calcium demand increases markedly during pregnancy, its absorption is also

increased. Thus, although the pregnant woman requires more calcium, she will absorb up to twice as much during pregnancy as she did before. The end result is an increased requirement from 800 mg/day for a non-pregnant woman, to 1,200mg/day for a pregnant woman. Dairy products are the best source of calcium, but green leafy vegetables are also good sources. If a woman cannot tolerate dairy products, her doctor may give her a daily supplement of calcium.

Folic Acid: This vitamin is most often deficient in the U.S. population. Because it is necessary for the production of red blood cells, the demand for folic acid increases markedly during pregnancy. Folic acid deficiency during pregnancy results in growth failure and congenital malformations involving the nervous system. Most prenatal vitamins, which requires a prescription, contain an adequate supplement.

Protein: Protein is one of the most essential "building blocks" the body needs to grow and maintain itself. The protein requirement of a growing fetus is very high and needs a constant supply. Luckily, dietary proteins are supplied by both animal and plant materials. In general, protein from animal sources is of greater nutritional value because it contains all of the essential amino acids. Proteins from cereals and vegetables are relatively deficient in certain amino acids. Vegetarians should consult a dietician to see that all the essential amino acids are included in the diet.

Remember, you need to eat healthy for a healthy baby. This includes extra calories plus a variety of well-rounded foods. Consult your doctor for particular supplements you may need.

Dr. Ferguson is a Heber City pediatrician, a specialist in the care of children from birth to 18 years. If there is something you would like Dr. Ferguson to write about, address your question to Mountainland Medical Clinic, 30 South 500 East, Heber, Utah, 84032.



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